

Amendment No. 1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<u> </u>	(Y/N)
ADOPTED AS AMENDED	<u> </u>	(Y/N)
ADOPTED W/O OBJECTION	<u> </u>	(Y/N)
FAILED TO ADOPT	<u> </u>	(Y/N)
WITHDRAWN	<u> </u>	(Y/N)
OTHER	<u> </u>	

1 Committee/Subcommittee hearing bill: Finance & Tax Committee
2 Representative Moskowitz offered the following:

3
4 **Amendment**

5 Remove lines 52-118 and insert:

6 been received within 60 days, as indicated in remittance advice
7 electronically transmitted by insurers or governmental entities.

8 (e) "Denial rate" means the denial value divided by the
9 total gross value of claims electronically billed during the
10 fiscal year reflected on the hospital district or county
11 hospital's claims submissions. The fiscal year for the denial
12 value and the fiscal year for the gross value of claims must be
13 the same year. If an insurer declares bankruptcy all claims
14 issued to and claim denials by that insurer shall be removed
15 from the numerator and denominator of this calculation.

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16 (f) "Department" means the Department of Financial
17 Services.

18 (g) "Hospital district" means any dependent or independent
19 special district that levies ad valorem taxes to support the
20 operations of one or more hospitals or other medical facilities.

21 (h) "County Funding" means funds appropriated by a county
22 government to support a hospital or the proceeds of an ad
23 valorem tax levied by a county to support a hospital.

24 (i) "County hospital" means any hospital receiving county
25 funding.

26 (j) "Increased tax revenues" means an increase in ad
27 valorem tax revenues levied by a hospital district or an
28 increase in county funding for a county hospital for a fiscal
29 year in comparison to the levying or funding entity's
30 immediately prior fiscal year.

31 (k) "Capital recovery report" means a report of claims to
32 an insurer or governmental entity and related claims denials for
33 all of the claims of hospitals and other medical facility
34 operations of a hospital district or a county hospital that
35 shall:

36 1. Include all claims data electronically submitted by all
37 hospitals and other medical facilities and operations of the
38 hospital district or county hospitals to a governmental entity
39 or insurer and remittance advice or responses electronically
40 transmitted by insurers or governmental entities in an

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41 electronic format that the approved provider hired by the
42 department can use to calculate denial rates; and

43 2. Include an attestation by a certified public accountant
44 that the billing information reflected in the report is
45 accurate, complete, and consistent with generally accepted
46 accounting principles.

47 3. Comply with federal and state confidentiality
48 standards.

49 (1) "Fiscal year" means the period commencing on October 1
50 and ending on September 30 of each year.

51 (m) "Specific payment" means the reimbursement amount
52 expected based on the Centers for Medicare and Medicaid
53 Services' fee schedule or the contracted rates specific to each
54 insurer.

55 (2) (a) The department shall contract with an approved
56 provider to receive capital recovery reports and calculate the
57 denial rate for each hospital district or county hospital based
58 on the data submitted in the capital recovery reports.

59 (b) Any approved provider contracted by the department may
60 not also work in any capacity for any hospital district or
61 county hospital that is required to submit a capital recovery
62 report pursuant to this section.

63 (3) Every hospital district or county hospital must
64 complete and submit to the approved provider under contract with
65 the department a capital recovery report within 90 calendar days

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66 following the end of the fiscal year. The hospital district or
67 county hospital may develop its own capital recovery report
68 according to the requirements of this section or it may hire an
69 approved provider to develop the capital recovery report. The
70 first capital recovery report shall be due following the 2015-
71 2016 fiscal year.

72 (4) Within 60 calendar days of receiving the complete